## AMERICAN PLANNING ASSOCIATION – PLAN 4 HEALTH GRANT

The City of Austin in partnership with the American Planning Association, Texas Chapter was awarded a \$110,000 grant from the American Planning Association through its <u>Plan4Health</u> program to combat two determinants of chronic disease—lack of physical activity and lack of access to nutritious foods.

## **About Plan4 Health**

Plan4Health is a 15-month program that strengthens the connection between planning and public health. Seventy-five percent of the program's funding supports local and state coalitions working to advance public health through better planning and partnerships. The program is implemented in partnership with the <u>American Public Health Association</u> (APHA) and represents a major new collaboration between planners and public health professionals. Funding for Plan4Health was provided through a grant from the <u>Centers for Disease Control and Prevention</u> (CDC).

# Project Reach and Basis in Existing Policy, Plans

The project will involve planning, community outreach, and program implementation designed to improve access to nutritious food and physical activity using evidence-based strategies in district food planning and active transportation encouragement within the communities of North Central/East Austin. The strategic approach is aligned with the goals and priorities of the City's Comprehensive Plan, *Imagine Austin*, as well as the following neighborhood plans: North Austin Civic Association (June 2000), the North Lamar Combined Neighborhood Planning Area (June 2010) and the Windsor Hills, Heritage Hills Combined Neighborhood Plan (January 2011).

# **Public Input and Outreach Coordination**

Upon notification of the grant award, The City of Austin and Capital Metro initiated a public outreach process to inform partners of the project as well as conduct outreach to stakeholders in the North Central/East Austin area. This outreach process has resulted in some clarification to the original grant request, which we have discussed with the funder and incorporated into the planned grant activities. These clarifications include:

 A focus throughout the priority communities as defined by the North Austin Civic Association, North Lamar/Georgian Acres Combined Neighborhood, and the Windsor Hills/Heritage Hills Combined Neighborhood Area.

This outreach effort will be a sustained and ongoing effort throughout the grant period to reach as many stakeholders as possible and improve upon the pilot program based on community input. The coalition is committed to working transparently with the community in the implementation of the program in accordance with city plans and policies.

Attached is the original grant application submitted to the American Planning Association along with the letters of support. Please note that the scope of the project has changed due to a lower grant award of \$110,000 (down from \$150,000). These changes include creating additional capacity to reach the full extent of the priority geographic area based on community input (as discussed above), a reduction in scope of media activities as well as elimination of tobacco cessation activities, as directed by the funder.

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## **Background**

The City of Austin (COA) is submitting a proposal for the Planning Healthy Coalitions request for proposals. COA has a proven history of success with implementing policy, systems, environmental, programmatic, and infrastructure change strategies to address chronic disease in a comprehensive manner. As a previous recipient of the Community Transformation Grant (CTG), Communities Putting Prevention to Work (CPPW), and Steps to a Healthier US grant, COA has already developed the human capital, skills, partnerships, infrastructure and functioning coalition necessary for successful project implementation. COA is well-positioned to make an immediate impact in our community, to demonstrate best practices, and to share best practices with other communities.

As health is affected by a broad range of elements, including social, economic, and environmental factors, the three-fold goal of this initiative, ¡Vámonos Rundberg!, is to first increase rates of physical activity by implementing a community-based encouragement program to reduce drive-alone trips and increase biking, walking, and public transit use to access work sites, schools, recreation, shopping and medical facilities. Secondly, we seek to increase access to fresh, healthy foods by conducting neighborhood engagement and outreach to improve the local sustainable food system. Thirdly, we seek to reduce tobacco use by increasing the locations and visibility of tobacco-free environments in the Restore Rundberg Revitalization area.

## **Coalition Capacity**

This initiative will be implemented through the collaborative efforts of the following City of Austin departments: Austin/Travis County Health and Human Services, Planning and Development Review, Parks and Recreation, Office of Sustainability, and Transportation. The city's public transit provider, Capital Metropolitan Transportation Authority (Capital Metro), will also serve a significant role. This team will serve as the core to capacity building across the City of Austin, as well as to the American Planning Association-Texas Chapter (APA Texas) and the Texas Public Health Association (TPHA). Over the past few years, members of this team have collaborated on webinars and talks regarding active transportation and connectivity to present for the APA, TPHA, and APHA, as well as the National Association of City Transportation Officials (NACTO). They have also presented to the US Council of Mayors regarding healthy food systems and to the National American Community Garden Association on community garden techniques and practices. Members have also served as a subject matter expert on a Division of Community Health Training and Technical Assistance Center for Transformation in Communities (TACTIC) webinar on smoke-free multi-unit housing and plan to continue these efforts at the TPHA Annual Education Conference in February as a panelist.

Supportive efforts will also be provided by members of the Chronic Disease Prevention and Control (CDPC) Coalition and the Restore Rundberg Revitalization Team. Within each of these teams are leaders from APA and APHA that will serve as liaisons with the respective local chapters to integrate professional capacity building opportunities as the program is implemented.

The CDPC Coalition is an umbrella coalition that works to increase collaboration amongst existing organizations, coalitions, and groups which has been meeting since September 2008. The Coalition has representation from multiple sectors, including health care, foundations, advocacy groups, businesses, higher education, public schools, government, housing, media, and the community at large. The CDPC Coalition has been active in the implementation of multiple strategies within the Community Health Improvement Plan (CHIP) and the Imagine Austin 30-Year Comprehensive Plan, both of which address the built environment to improve physical activity and increase access to healthy foods. Efforts have included developing model healthy vending guidelines, promoting a healthy restaurant certification program, promoting SNAP utilization at Farmers Markets, increasing community gardens, promoting complete streets, bike and pedestrian plans, and providing land development code recommendations that promote healthy living. The coalition has also worked to implement smoke-free parks and tobacco-free campuses at more than 50 sites. This includes Austin Travis County Integral Care, the local mental health and substance abuse authority, which serves a population that is disproportionally affected by tobacco use. As a result, staff smoking rates have dropped from 28% to 11.6%.

The Restore Rundberg Revitalization Team is a 14-member, community-based coalition comprised of representatives from area neighborhoods, the community, government, higher education, public safety, researchers, and stakeholder groups that come together to help address persistent crime and social challenges in the area. Their goal is to develop innovative crime solution and complementary social services that improve quality of life, health, safety, education, and well-being of individuals living and working in the Rundberg neighborhood.

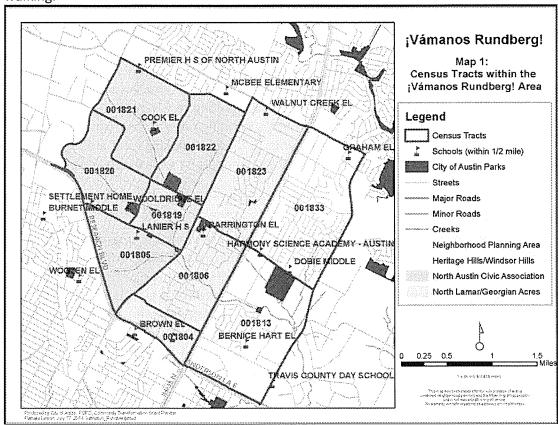
### **Demonstrated Need and Impact**

¡Vámonos Rundberg! serves 42,438 residents in 21,300 households within an 8-Census tract region of North Austin, Texas, 75% of the *Restore Rundberg Revitalization Area*. Austin's Rundberg corridor is defined as: Metric Boulevard to the west, Anderson Lane to the south, Dessau Road to the east, and Braker Lane to the north. The population in this region is 67.7% Hispanic/Latino, and overall is 82.4% minority. ¡Vámonos Rundberg! will be targeting health disparities in the Hispanic/Latino population, which are also applicable to the other priority population groups, and resources will be made available to all. Within Census Tracts 18.04, 18.05, 18.06, 18.13, 18.20, 18.21, 18.22, 18.23, and 18.33 (see "Vamonos\_Rundberg\_Map.pdf" below), 35.6% of the population over age 25 has no high school diploma, which is 2.7 times the rate of low educational attainment in Travis County, and 31.1% is below 100% federal poverty level.¹ In Travis County, 41.4% of the Latino/Hispanic population is uninsured, compared to the County-wide uninsured rate of 19.1%.²

A portion of Census Tract 18.04 is outside of the Restore Rundberg Revitalization Area Boundaries (from which Vámonos Rundberg's study area is defined). Educational attainment and poverty-level data were calculated at the Census-Tract level, accounting for an estimation that involves part of the population outside of the boundary. Tract 18.04's education and poverty-level data is similar to the other 7 tracts as

This population has 30.3% below the age of 18, 61.5% are 18-64, and 10.8% are 65 and older. Housing is majority renter-occupied (70.1%), and this area has many first generation U.S. residents.

Within the 8-Census tract region, most trips (87%) are done by single-occupant vehicle while 6.6% are by public transportation, less than 1% by bike, and 1.6% by walking.<sup>3</sup>



The <u>Restore Rundberg</u> revitalization area residents are at a higher risk to be disproportionally burdened with chronic disease. Adult obesity rates are higher among Mexican-Americans than non-Hispanic whites, which bestows higher chronic stress, reduced lifespan, and increased instances of diabetes, hypertension, and certain cancers. The <u>2012 Austin/Travis County Community Health Assessment</u> (CHA) identified

all have >20% of the population 100% below federal poverty level and >20% of adults 25 and older without a high school education.

<sup>&</sup>lt;sup>2</sup> Centers for Disease Control and Prevention. *Texas Behavioral Risk Factor Surveillance Survey Data*. Atlanta, Georgia: US Department of Health and Human Services, Centers for Disease Control and Prevention, 2008-2010.

<sup>&</sup>lt;sup>3</sup> U.S. Census Bureau; "Journey to Work, B008006, 2009-2013 American Community Survey 5-Year Estimates", generated by Laura Dierenfield, using American FactFinder; <a href="http://factfinder2.census.gov">http://factfinder2.census.gov</a>; (16 December 2014).

<sup>&</sup>lt;sup>4</sup> Centers for Disease Control and Prevention Minority Health. http://www.cdc.gov/minorityhealth/populations/REMP/hispanic.html Last accessed 17 Jul 2014.

key social and physical environment gaps that lead to chronic disease, particularly among Hispanics and persons living in poverty. The lack of access to healthy foods and safe environments for physical activity were identified as concerns. <sup>2</sup> Additionally, it found that the physical inactivity rate for the Hispanic/Latino population is more than double that of whites (31.8%, respectively and 15.3%, respectively). Hispanic adults and children report eating less combined fresh fruit and vegetable servings than any other population group, and Latino/Hispanic adults are 55% more likely to report no physical activity or exercise than the average Travis County resident, and more than 100% more likely to report this than whites in Travis County. Austin/Travis County has almost 50% more Latino/Hispanic adults who are obese, compared to white adults. Prevalence of obesity among Hispanic children in the Austin Independent School District is 25%. <sup>5</sup>

Significant disparities in smoking rates exist among resistant, hard-to-reach, medically indigent populations in Travis County. Smoking rates among Travis County residents making less than \$25,000 per year is 23.6% and smoking rates among Travis County adults with no health insurance is 25.8%, compared to the overall smoking rate of 14% among Travis County adults.<sup>6</sup>

## **Proposed Activities**

¡Vámonos Rundberg! employs evidence-based strategies to improve access to nutritious food, health care, and physical activity, and to decrease exposure to tobacco products. The strategies and activities align with the CHA and have been prioritized through the CHIP process led by the CHA/CHIP steering committee and supported by the Chronic Disease Prevention and Control Coalition. They have also been integrated into the *Imagine Austin* plan. This proposal addresses the following chronic disease risk factors:

- Physical inactivity;
- Unhealthy diet; and
- Tobacco.

As a result of the proposed interventions, it is anticipated that the following outcomes will be achieved:

- Increased opportunities for physical activity;
- Improved access to fresh, healthy food;
- Decreased exposure to and use of tobacco and nicotine products; and
- Positive changes in attitudes, beliefs, knowledge, awareness, and behavioral intentions related to physical activity, healthy eating, and tobacco use.
- Increased neighborhood-level capacity to address chronic disease risk factors through public-private partnerships.

<sup>&</sup>lt;sup>5</sup> Children's Optimal Health. (2010, September). Child Obesity: By Neighborhood and Middle School. Retrieved from http://www.cohtx.org/wp-content/uploads/2014/01/Child-Obesity-Middle-School-08-09.pdf

 $http://www.co.travis.tx.us/health\_human\_services/research\_planning/publications/acs/acs\_focus\_on\_poverty\_2011.pdf$ 

# 1.) Increase opportunities for physical activity by 2% bicycle mode share, 8% walking mode share, and 10% public transit mode share by 2020.

At the forefront of ¡Vámonos Rundberg! is the Smart Transportation Education Program (STEP or PISAR—Programa para Instigar Senderismo, Actividad y Rutas, translated: "Program to Instigate Walking, Activity and Routes"), which will seek to increase opportunities for daily physical activity through use of active transportation such as walking, bicycling, and public transit. STEP/PISAR is modeled after the successful SmartTrips program within the City of Portland's Bureau of Transportation (BOT). SmartTrips has yielded a 9-13% reduction in drive-alone car trips by residents in all study areas, and the corresponding causation of an increase in walking, bicycling, and transit trips. The model SmartTrips program in Portland, Oregon costs \$10 per person and a typical 20,000 household program costs \$570,000 and utilizes 3.35 FTE staff. Due to the limited resources, we anticipate working with a sub-set of the population focused around an elementary and middle school catchment area within the Restore Rundberg Revitalization area. The community served by Hart Elementary school and Dobie Middle School is an ideal setting in which to pilot this model program due to the recent investments by the City in an \$18 million bridge and protected bicycle facilities on either side of the bridge, as well as the 15 different transit routes that serve the community.

The short, intermediate, and long-term outcomes are as follows:

### Short-term Outcomes

- Increase awareness of active transportation choices by delivering "Transportation Toolkits" to 500 households in the *Restore Rundberg Revitalization Area* by the end of the project period.
- Engage 50% of targeted households in an event, class or other program that provides additional skills or knowledge about active transportation choices by the end of the project period.

### Intermediate Outcomes

- Increase physical activity levels among targeted households by achieving at least a 10% increase in use of active modes by the end of the project period.
- Increase positive attitudes toward the use of active transportation by 20% among residents of the Rundberg community by the end of the project period.

### Long-term Outcome

Improve the health status of children and adults by making active transportation
the easiest, cheapest and most efficient transportation choice for the Rundberg
community, as shown by 2% bicycle mode share, 8% walking mode share, and
10% public transit mode share by 2020.

<sup>&</sup>lt;sup>7</sup> PBIC Case Study: Portland, Oregon SmartTrips. Pedestrian Bicycle Information Center. http://www.pedbikeinfo.org/data/library/details.cfm?id=3961 Last accessed 15 Jul 2014.

## Key Activities

To achieve these outcomes, COA will initiate the following key activities:

- 1.) The City of Austin Transportation Department (ATD) will work with other COA departments and Capital Metro to identify key bus, bicycle and walking routes to employment, fresh, healthy food sources (grocery stores, farmer's markets), healthcare facilities, recreational areas, and schools with the targeted geographic area.
- 2.) ATD will create a series of low literacy pamphlets and digital media in Spanish, English, and other languages containing this routing information along with safety tips and other active transportation guidance. This information will be packaged in "Transportation Toolkits" that will be mailed out to households.
- 3.) ATD will simultaneously work with area nonprofits to identify or develop events such as group rides, walks and educational classes that teach or encourage the use of active transportation.
- 4.) ATD will mail out a newsletter to households in the targeted geographic area. This newsletter will also include instructions about how residents can request "Transportation Toolkits". Direct outreach through area clinics, schools, employment centers, and recreational centers will also be done with the same information. Capital Metro will provide free bus passes for program participants to encourage use of transit.
- 5.) ATD will conduct a comprehensive evaluation to measure rates of physical activity. Surveys will first be conducted with any resident who requests more information following the initial mail-out to gauge baseline attitudes toward active transportation choices. These surveys will be repeated with the same individuals at the end of the 15-month grant period. Secondly, ATD will work with area partners, such as Capital Metro, other COA departments, and key destinations such as recreation centers to measure increases in use of transit, walking or bicycling to and from these destinations. Thirdly, ATD will monitor travel survey information collected by the U.S. Census Bureau to measure active transportation mode share.
- 6.) Partner with the COA Office of Sustainability and the Restore Rundberg Team on a series of focus groups and surveys to more fully understand the barriers to accessing jobs, school, food and recreation. ATD will use this information to work with other COA Departments, Capital Metro and other transportation agencies to identify infrastructure and policy recommendations that will make it easier for more people to choose walking, bicycling or transit as their primary mode of transportation. These improvements would be expected to occur in future years following the 15-month grant period.
- 2.) Improve access to fresh, healthy food by engaging 5% of targeted households in developing a local food policy that improves access to healthy food by 2020.

Another component of ¡Vámonos Rundberg! will employ evidence-based strategies to improve access to fresh, healthy food that align with the priorities from the Restore Rundberg Revitalization Team and the City of Austin's 30 year comprehensive plan, *Imagine Austin*. A process referred to as 'District Food Planning', developed in Vancouver, Canada has been adapted to develop a city-wide plan to engage each community in the City of Austin's development of a series of 'neighborhood food plans'. Before implementing a city-wide program, a pilot neighborhood food plan will be developed. Rundberg has been selected as the pilot due to its high risk of dietary-related disease rates and community interest in food system improvement.

Although there are currently three community gardens in the 8-Census Tract area, they are not fully utilized when compared to other community gardens in the city. The Gus Garcia community garden, located at Gus Garcia Recreation Center, opened September 2013 and has 20 out of 28 garden plots still available. All other community gardens in the city have waiting lists. This demonstrates the lack of awareness of this community resource and other opportunities to improve access to fresh, healthy food.

The short, intermediate, and long-term outcomes are as follows:

#### Short-term Outcomes

- Increase awareness of the impact of dietary choices on health by delivering "Rundberg Food System Report" to 500 households in the *Restore Rundberg Revitalization Area* by the end of the project period.
- Engage 50% of targeted households in identifying barriers to improving healthy eating choices by the end of the project period.
- Engage targeted households to prioritize 3 strategies to increase healthy eating choices in the Rundberg food system by the end of the project period.

## *Intermediate Outcomes*

 Increase awareness of resources to improve access to healthy food through exposure to the Rundberg Food System Toolkit by 50% of targeted households by the end of the project period.

## Long-term Outcomes

• Engage 5% of targeted households in developing a local food policy that improves access to healthy food by 2020.

#### Key Activities

To achieve these outcomes, COA will initiate the following key activities:

1.) Develop metrics for the Rundberg community, based on the 2014 Austin Food System Report developed by the COA Office of Sustainability (OoS), including food system assets and liabilities. Metrics would include things such as the number of local community and school gardens, urban farms, and food retail. Relevant food access metrics would also be included, such as

- food insecurity information, food desert maps, and dietary-related disease statistics.
- 2.) Collaborate with ATD and the Restore Rundberg team on a series of focus groups and surveys to more fully understand the barrier to accessing jobs, school, food and recreation. OoS will use this information to identify and engage stakeholders in the Rundberg food system for a perspective on the status of the food system and setting priorities for change.
- 3.) Analyze data in the winter of 2015, from the focus groups and surveys.
- 4.) Develop a Rundberg Food Systems Report documenting the community's food system assets and liabilities, as well as the priorities the community wants addressed.
- 5.) Present the report to the community stakeholders in the spring of 2015 to get feedback and ensure that the community's vision is accurate.
- 6.) Develop a Food System Toolkit, based on the vetted Food System Report to match COA resources and private sector resources with identified Rundberg Food System community priorities. The toolkit possibilities include assistance to develop the following: new community or school gardens, effectiveness of existing community or school gardens, new commercial urban farms, new food processing business, new food hubs for food distribution, new commercial kitchen, increased retail access to local/healthy food at corner stores/grocery stores, new farmers markets, farm stands, school farm stands, or neighborhood food purchasing co-ops, new food waste recovery business, and new centralized community composting system.
- 7.) Based on feedback from community stakeholders regarding the implementation of an action from the Food System Toolkit, the COA Food Policy Manager and targeted community members will select a priority area in the food system and develop a policy proposal to enhance or support that action.

# 3.) Increase the number of people with access to tobacco-free properties from 0 to 8491.

¡Vámonos Rundberg!'s final project component involves increasing tobacco-free environments in the project area. Austin/Travis County Health and Human Services Department (HHSD) has significant experience working with organizations, including schools and multi-unit housing properties—both market-rate and affordable—to adopt tobacco-free and smoke-free policies.

The 2006 U.S. Surgeon General's report on secondhand smoke supports the adoption of smoke-free policies in multi-unit housing as the only way to protect residents against involuntary exposure. In fact, 65% of air within a unit can be lost through leakage to another unit, hallway, or exterior. Additionally, smoking-related fires are a leading cause of civilian fire deaths.

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<sup>&</sup>lt;sup>8</sup> Center for Energy and Environment. Reduction of Environmental Tobacco Smoke Transfer in Minnesota Multifamily Buildings Using Air Sealing and Ventilation Treatments, at 12 (2004), available at

Tobacco-free school environments are a critical intervention point for youth, as 9 out of 10 smokers start before the age of 18. <sup>10</sup> Denormalizing tobacco-use, particularly in environments where youth spend a large amount of time, support the message to not use tobacco.

Barriers to increasing access to smoke-free or tobacco-free settings include minimal understanding among stakeholders of the health benefits of having a smoke-free or tobacco-free setting and the unregulated market of electronic cigarettes and other nicotine delivery systems. HHSD will continue to assess the impact of implementing the comprehensive policies to decrease the risk of smoking-related fires, economic costs, and secondhand smoke exposure.

The short, intermediate, and long-term outcomes are as follows:

#### Short-term Outcomes

- Engage 3 multi-unit housing property managers in Rundberg to increase their knowledge about smoke-free multi-unit housing and the dangers of secondhand smoke by the end of the project period.
- Collaborate with 9 Rundberg schools to implement tobacco-free campuses by the end of the project period.

#### Intermediate Outcomes

- Increase the number of affordable, multi-unit housing units that have a smoke-free policy impacting low-income and persons with disabilities from 0 to 302.
- Increase signage promoting tobacco-free school campuses to encourage compliance with tobacco-free policies from 0 to 9.

### Long-term Outcomes

• Increase the number of people protected from secondhand smoke in Rundberg from 0 to 8491.

### Key Activities

To achieve these outcomes, COA will initiate the following key activities:

1.) Meet with affordable housing properties to discuss smoke-free property implementation. COA will work with affordable housing property managers, including the Housing Authority of the City of Austin (HACA) and other housing partners to promote smoke-free multi-unit housing

http://www.mncee.org/getattachment/c185694c-5df3-4e59-be20-aedcaac772fc/.

<sup>&</sup>lt;sup>9</sup> U.S. Department of Homeland Security-U.S. Fire Administration. (June 2012). Smoking-Related Fires in Residential Buildings (2008-2010). Topical Fire Report Series, 13:6. Retrieved from www.usfa.fema.gov/downloads/pdf/statistics/v13i6.pdf

<sup>&</sup>lt;sup>10</sup> U.S. Department of Health and Human Services. Preventing Tobacco Use Among Youth and Young Adults: A Report of the Surgeon General. Atlanta, GA: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2012. - See more at:

http://www.tobaccofree florida.com/current-issues/tobacco-free-schools-the-issue/#s thash. As VDD tUq. dpuf

- and decrease exposure to secondhand smoke, smoking-related fires, and demand for smoke-free living in Rundberg.
- 2.) Work with affordable multi-unit housing staff to assist in their communication plan by conducting tobacco education at their sites, to include how the smoke-free policy will impact residents and the resources available for support.
- 3.) Coordinate with a mental health and substance abuse partner, Austin Travis County Integral Care (ATCIC), to provide free community cessation classes free of charge to residents at affordable housing.
- 4.) Provide tobacco cessation facilitator training to affordable housing staff to ensure long-term support of cessation resources.
- 5.) Develop smoke-free property signage with assistance from affordable housing staff to support their smoke-free policy and increase visibility to residents.
- 6.) Assist Rundberg area schools in their tobacco-free campus initiative by providing tobacco and electronic cigarette education to students and staff.
- 7.) Develop tobacco-free property signage with assistance from school staff to support policy implementation.

## **Project Management**

## **Overall Project Management**

Project management for this project as a whole will be provided by each of the COA participating departments. The following staff members will provide in-kind support:

- COA Program Coordinator / Contract Manager-10%
- HHSD CHIP Planner—5%
- PDRD Imagine Austin Planner—5%
- HHSD Imagine Austin-Health Austin Priority Program Lead—5%

### **Coalition Management**

COA will coordinate the project with the APA-Texas Chapter and the TPHA coalition to manage and implement evidence-based best practices. Regular communication through face-to-face meetings and conference calls will ensure that progress is tracked toward achieving grant deliverables. The coalition will share best practices through professional organizations at the local, state, and national levels.

## **Opportunities for Physical Activity Project Management**

ATD will coordinate the implementation of the STEPS/PISAR project in three phases. Phase one, from mid-February to mid-June will focus on establishing preferred routes, developing educational materials, and creating and scheduling classes and events for phases two and three. This phase will also focus on training and technical assistance to area non-profits who will play a vital role in delivering information to the community in the form of print media, classes, and events. Phase two, from mid-June to mid-

November, will focus on the initial mailing to the community and follow up outreach by area non-profits. Changes and improvements will be made based on early lessons learned. In Phase three, from mid-December to mid-April of 2016, ATD will conduct the three part evaluation including surveys, focus groups and modal counts. In addition, policy and infrastructure investments will begin to be identified.

ATD will commit 10% of the Program Manager's time (Laura Dierenfield) and 10% of the Project Coordinator's time (Adrian Lipscombe), both on an in-kind basis. Capital Metro will commit 10% of staff time on an in-kind basis, and the Public Works Department will contribute 5% of the Safe Routes to School Team's time for a total of 0.35 FTE on the project. Additional staffing for outreach to the community is expected to be provided by area non-profits through grants or service contracts offered by ATD.

ATD will administer the STEPS/PISAR program out of the Active Transportation Division. All communications and meetings will be convened by ATD and hosted at ATD offices. A design consultant will be hired to produce the pamphlets.

ATD will establish an implementation committee comprised of representation from Capital Metro and area non-profits in order to complete the stated activities. The Committee is expected to meet bi-weekly for the first six weeks of the grant, and transition to monthly meetings as the project is fully implemented. Area non-profits are expected to receive at least 50% of grant funds to carry out outreach and education to residents. This will include a variety of educational classes, hosted walk and bike events and one-on-one outreach.

Training of area nonprofits on outreach will be done in phase two. Capital Metro will offer in-kind staff support to provide motivational interviewing to nonprofit partners to aid in their outreach efforts.

¡Vámonos Rundberg! will utilize community-wide campaigns to engage the target population on opportunities to increase access to physical activity. ATD and Capital Metro will construct a communication plan that includes message development, communication channel identification, materials, activities, partnerships, and evaluation for the identified goals and audience. Strategic media will be used to reach the target population; examples include earned television and radio media, paid media in community/congregation bulletins, and contributions for community-wide events. All media touches will be tracked for the population reached, paid/earned, and partnering for media coverage, in order to be reported in a media impressions worksheet that will be reported twice a year. Program successes will be logged and will be written on the organization's blog, highlighted in Capital Metro and City of Austin media/newsletters, and at least two will be submitted annually to the CDC. Communication is part of the Community Involvement Strategist's work responsibilities, and we will leverage communication through our partners at Health and Human Services Department, Planning and Development Review Department, Office of Sustainability, Austin Transportation Department, and the Chronic Disease Prevention and Control Coalition to utilize their combined 10,000 person audiences.

Access to Fresh, Healthy Food Project Management

Project Narrative—APA Texas Chapter, City of Austin

Parks and Recreation Department will commit 5% of the Conservation Program Coordinator's time, in-kind, to this project. Office of Sustainability will commit 5% of the Food Policy Program Manager's time, in-kind to this project.

# Access to Tobacco-Free Properties Project Management

HHSD will commit 5% of the Program Manager's time, 10% of the Program Coordinator's time, and 10% of the Health Educator's time, all in-kind to the tobacco project. ATCIC tobacco cessation specialists will provide cessation classes for affordable housing residents during the project period, through existing funds.